PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be used to correspondence including the below or directed of tions.	or transmitting the ISSU in the Patent, advance on the patent, advance on the patent in Block 1, by (a	JE FEE and PUBLICAT rders and notification of a specifying a new corre	ION FEE (if requ naintenance fees v spondence address	ired). B vill be r ; and/or	Blocks I through 5 sh mailed to the current (b) indicating a separ	nould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPOND	Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
Suite 600 1050 Connecticu		LC I he Stat add tran	Cer reby certify that th es Postal Service v ressed to the Mail smitted to the USP	tificate is Fcc(s vith suff I Stop I TO (57)	of Mailing or Transr) Transmittal is being ficient postage for firs ISSUE FEE address () 273-2885, on the day	nission deposited with the United t class mail in an envelope above, or being facsimile the indicated below.		
Washington, DC	20036	¥)	(Depositor's name)					
		<i>[</i>				(Signature)		
						(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
09/939,751	08/28/2001		Yasuhiro Torimaru			08391-00019	3839	
		NERATING A MAIN CI	LOCK FOM AN OSCILL TION SIGNAL	ATION SIGNAL I	BASED	UPON A WAKEUP	SIGNAL	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0		\$1700	11/06/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS	\neg				
CONNOLLY, MARK A		2115	713-500000	•				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternati (2) the name of a single registered attorney or	a single firm (having as a member a ley or agent) and the names of up to ent attorneys or agents. If no name is				
PLEASE NOTE: Uni	less an assignee is ident h in 37 CFR 3.11. Comp GNEE	ified below, no assignce	THE PATENT (print or ty data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY Kawasaki,	atent. If an assign assignment. and STARFARRA	964 NA 1501		1400.00 OP	
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individua 3 RC	PpUratio	on or other private gro	up entity of The emment	
4a. The following fec(s) are submitted: **All Issue Fee **All Publication Fee (No small entity discount permitted) **All Advance Order - # of Copies 10 **All Advance Order - # of Copies 10 **All Advance Order - # of Copies 10 **All Publication Fee (No small entity discount permitted) **All Publication Fee (No small entity discount permitted) **All Publication Fee (No small entity discount permitted) **All Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) **All A check is enclosed. **All Payment by credit card. Form PTO-2038 is attached. **All The Director is hereby authorized to charge the required fee(s), any deficiency, or credit are overpayment, to Deposit Account Number 01-2300 (enclose an extra copy of this feet)								
5. Change in Entity Sta	tus (from status indicated s SMALL ENTITY statu		☐ b. Applicant is no lon	ger claiming SMA	LL ENT	ITY status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.								
Authorized Signature	Michael		Date 09/0					
Typed or printed name Michele L. Connell Registration No. 52,763								
This collection of inform	ation is required by 37 C	FR 1.311. The information	on is required to obtain or	ctain a benefit by t	he publi	ic which is to file (and	by the USPTO to process)	

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.